

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number
210121.455C21

FY 2005

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number 10/775,972

Filed February 10, 2004

For COMPOSITIONS AND METHODS FOR THE THERAPY AND DIAGNOSIS OF LUNG CANCER

Art Unit
1642Examiner
Lei Yao, Ph.D.

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$120
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

☐ Applicant claims small entity status. See 37 CFR 1.27.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-1090. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

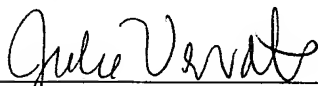
☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration No. 50,461

☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____



Signature

Julie A. Urvater, Ph.D., Patent Agent

Typed or printed name

August 21, 2006

Date

206-622-4900

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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120.00 DP



Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4878).

FEE TRANSMITTAL

For FY 2006

Complete if Known

Application Number	10/775,972
Filing Date	February 10, 2004
First Named Inventor	Robert A. Henderson
Examiner Name	Lei Yao, Ph.D.
Art Unit	1642
Attorney Docket No.	210121.455C21

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$120)

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, except for the filing fee☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Charge any underpayments or credit any overpayments

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Fee (\$)

50

Small Entity

Fee (\$)

25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

Total Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

Multiple Dependent Claims

6

-20 or HP =

0

X

=

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims

Extra Claims

Fee (\$)

Fee Paid (\$)

1

-3 or HP =

0

X

=

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)) the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Extra Sheets

Number of each additional 50 or fraction thereof

Fee (\$)

Fee Paid (\$)

-100 =

/50 =

(round up to a whole number)

x

4. OTHER FEE(S)

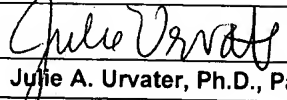
Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): One month extension of time fee

Fees Paid (\$)

120

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	50,461	Telephone	206-622-4900
Name (Print/Type)	Julie A. Urvater, Ph.D., Patent Agent			Date	August 21, 2006